

THE
BOSTON MEDICAL AND SURGICAL
JOURNAL.

VOL. XXIII.

WEDNESDAY, JANUARY 27, 1841.

No. 25.

CASES OF DEFORMED FEET.

Report of Cases of Deformed Feet, treated by mechanical means alone, with a description of the Apparatus employed. By HERB CHASE, M.D., of Philadelphia.

In deformities of the feet, whether there exist an inversion or eversion, the same principles will apply to their treatment. In these cases, whether the foot has advanced to the first, second or third degree of *varus*, as described by authors, the first step towards a restoration consists in bringing the distorted foot into the same axis with the leg. This we have accomplished by means of an instrument represented in Fig I. It consists of two parts, a brass splint (*a*), and a steel plate (*b*), connected by means of a malleable iron neck (*f*), which can be bent, by considerable force, but will not yield to the power necessary to act upon the foot. The utility of this arrangement will be readily understood by the operator, because, in order to act to the greatest mechanical advantage upon the foot, the plate is required to be placed at different angles with the splint in different stages of the progress of restoration. The steel plate should be one inch in width for an adult, two lines in thickness, and extend to a distance equal to the interval between the ankle-joint and the ends of the toes.

In cases of inversion of the foot, the brass splint is applied to the outside of the leg. It should embrace one-third of the circumference of the limb, and should extend from just below the knee to the upper part of the external malleolus. It is secured to the limb by the straps (*d d*).

By means of this apparatus, the foot is brought outwards towards the steel plate as far as possible, without occasioning much pain, and is then confined by the strap (*e*), which is thrown around the foot and passed through the fenestræ (*c c*).

In the progress of the restoration of the foot, the strap surrounding it requires to be drawn more firmly from time to time, as will be mentioned in the report of cases.

In *eversion* of the foot, the brass splint is to be adjusted to the inner side of the leg, when the same principles will apply as in *inversion*.

The use of this instrument must be continued until the foot is brought

FIG. I.



into the same axis with the leg, and until the disposition to a return of the deformity has ceased.

The second indication to be fulfilled is to effect the proper flexion of the foot. This we have accomplished by means of the instrument represented in Fig. II.

It consists of a plate of brass (*a*) moulded to fit accurately to the back and sides of the leg, and extending from immediately below the knee to just above the malleolus. A second piece (*b*) formed to act as a sandal or shoe, equal in length, and a little wider than the foot. These are attached by a hinge (*ck*) so as to admit of flexion and extension. The leg is secured in the brass splint, by straps (*d d*). The foot is secured to the shoe by a strap (*e*) which is thrown around the instep, then passes through a fenestra behind the heel, and the extremities being reverted, are returned over the instep, where they are secured by a buckle. There is also a strap (*g*) intended to pass around the foot near the toes, in order to draw it outward, when flexion is being made. The fenestræ at the right and left of *b*, are for the passage of straps, when the instrument is employed in cases of eversion of the foot. *h h* are two straps for approximating the extremities of the instrument. *i*, a knob for securing the straps.

FIG. II.



By examining the instrument itself, it will be seen that the appendage marked *k*, does not clasp the shoe firmly, but stands out from it to the distance of half an inch on each side. This appendage passes beneath the shoe, and is attached by its centre, at a spot just anterior to the fenestra (*f*), by a universal joint with a limited motion. By means of this arrangement, when it becomes desirable to produce some degree of abduction of the foot in cases of inversion, this object may be accomplished by drawing the strap *h i*, more firmly than its fellow.

The leg is to be placed in the brass splint *a*, the foot in the shoe *b*, the leg is secured by the straps *d d*, the heel kept down by the strap *e*, and if desirable, the loop of the strap *g*, thrown around the foot in cases of varus, to produce partial abduction.

During the progress of restoration, the straps *h i*, and *h*, are to be drawn, from day to day, more tense, as the foot yields to the action of the instrument.

In deformities of the feet varying from those above mentioned, the instrument employed will be described in connection with the cases.

CASE I. Congenital Calcanean Club-foot of the left side. Restoration of the foot to a natural position by mechanical means, in twenty days.—On the thirteenth of July, 1840, J. B. H., Esq., of this city, requested me to see his little son, a healthy, robust child four weeks old, and whom I found to have a deformity of the left foot (calcanean club-foot of the worst variety). The deformity is congenital—no cause can be assigned for it. Mrs. H. is the mother of several children, all of whom are perfect in their limbs, nor can there be traced a deformity either in the paternal or maternal branches of the family, both of which are numerous.

FIG. III.



FIG. IV.



The dorsum of the foot was drawn upward, in such a manner as to rest firmly upon the lower part of the front of the leg, whilst an obliquity caused the small toe to rest on a line with the inner side of the leg. See Fig. III.

From the tender age of the child, it was not to be expected that much rigidity of the misplaced parts could have taken place as yet; therefore, the foot could be brought nearly to its true position, by moderate force applied to it by the hand, whilst the leg and ankle were supported; but returned immediately to its distorted position when these efforts ceased.

There was some want of development in the foot and leg generally, when compared with its fellow; and at the lower part of the leg, where the dorsum of the foot rested upon it, the subcutaneous fat and cellular tissue were to a considerable degree wanting, and the leg, when the foot was elevated, presented a perfect cast of the dorsum of the foot.

For the relief of this deformity, I applied to the outer side of the leg, for the purpose of bringing the foot not only downward, but inward, an instrument extending from the knee to the bottom of the foot, similar to

that represented in Fig. I., with the plate *c* bent at a right angle with the splint at *f*, and secured by the straps *b b*. The foot was then brought down to half the distance required for restoration, and secured by a roller passing round it and through the fenestræ.

For a few days I saw this patient daily, afterwards less frequently. At each visit I adjusted the instrument when necessary, bringing the foot nearer to the required degree of extension and eversion until the second of August, when it was brought to the correct position as seen in Fig. IV., and remained so when the instrument was removed.

Aug. 15th. The patient has apparently suffered very little from the dressings. Not even an abrasion of the skin has followed the use of the instrument, and the child enjoys all the proper motions of the foot with perfect freedom.

Oct. 16th, 1840. This little patient has been able, for several days past, to stand even upon his feet.

CASE II. *Congenital Inversion of the Right Foot, of the worst variety—(varus of the third degree)—treated with complicated machinery for several months, with little or no effect. Restored in thirty-one days by a simple apparatus.*—Early in the autumn of 1839, my attention was called to Samuel M'Kee Chambers, ætat. 2 years, who had a complete inversion of the right foot. He was walking upon the outer edge of the foot, which had formed for itself a perfect cushion, upon which it rested—the sole turning backward whilst the toes pointed directly towards the opposite ankle. See Fig. V. In addition to this inversion of the foot, there was a defect in the knee-joint, permitting the leg to revolve upon the thigh, to the extent of one-fourth of a circle, and by the application of some force, the toes could be made to point directly backward. This seemed to be owing to a change in the cartilages of the joint, and the relaxation of the capsular and other ligaments. The leg itself was somewhat smaller than its fellow, but the thigh appeared of its natural dimensions.

As soon as an apparatus could be prepared, I adjusted it to the foot of the child, and kept it in constant use, until May, 1840, when finding that very little progress had been made towards a permanent restoration of the foot, and that the patient was very unwilling to wear the machine, it was laid aside. The leg, however, had commenced increasing in size—the knee had acquired some strength, and the limb was brought partially to its true position.

July 1st, 1840. Having now succeeded in the restoration of other cases of deformed feet requiring more difficult treatment, I again returned to my patient.

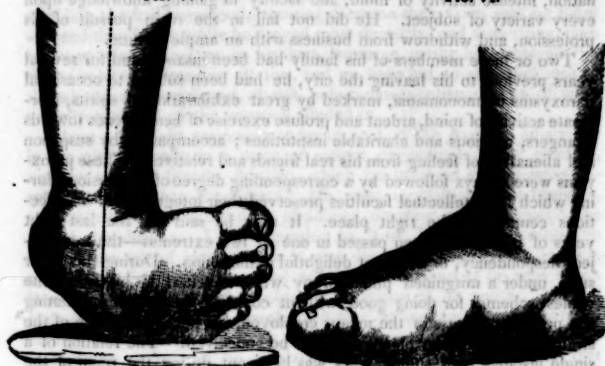
On the 3d of July, I applied an instrument similar to the first of those described in the introduction to this paper (Fig. I.), and by the 10th the foot was brought on a line with the leg. On the 12th the apparatus for flexion (Fig. II.) was adjusted, which brought the foot to the position as seen in Fig. VI., in thirty-one days from the application of the first instrument.

Until the 15th of July, the foot was daily brought nearer to the desired position. Very little pain was experienced, no soreness was oc-

casioned by the pressure, and the patient, who is one of the most robust, obstinate, and restless of children, ran at large in the streets at will, during the whole treatment. An ordinary shoe was applied on the 12th of August.

FIG. V.

FIG. VI.



This is the only instance of any deformity known to have occurred in this family, either in the paternal or maternal branches, and no cause can be assigned for it by the parents.

Neither the tendons nor the fascia plantaris offer any resistance to the permanency of the foot as restored, nor do the tarsal or metatarsal bones exhibit that rigidity which so often limits motion, until a late period after the foot is brought to its natural shape.

The foot, in walking, assumes its proper position, and the patient does not limp or hesitate at all in his movements. The arch of the instep is not defective, and all the varied motions, even including abduction, are performed as perfectly as upon the opposite side.

Oct. 18th, 1840. Two weeks ago I called to ascertain the situation of my patient's foot, and found him in the street, bare-footed, and was told he had been without his shoes for three weeks. No relapse from the original restoration had followed, and on the 15th inst. I exhibited this case to my class in a lecture on deformities.

[To be concluded next week.]

DR. MACDONALD'S CASES OF MONOMANIA.

[Concluded from page 390.]

CASE II.—A. B. was admitted into the Bloomingdale Asylum on the 17th November. He was about 50 years of age, short in stature, and disposed to obesity. His head large and strikingly beautiful, his complexion fair, and his temperament sanguineo-melancholic. Until the

last year of his life, which has been spent in retirement in the country, he had been actively engaged in mercantile pursuits, and had been at the head of one of the first houses in the city. Always remarkable for chivalrous notions of honor, generosity of disposition, brilliancy of imagination, intense activity of mind, and facility in gaining knowledge upon every variety of subject. He did not fail in the main pursuit of his profession, and withdrew from business with an ample fortune.

Two or more members of his family had been insane; and for several years previous to his leaving the city, he had been subject to occasional paroxysms of monomania, marked by great exhilaration of spirits, inordinate activity of mind, ardent and profuse exercise of benevolence towards strangers, religious and charitable institutions; accompanied by suspicion and alienation of feeling from his real friends and relatives. These paroxysms were always followed by a corresponding degree of depression, during which his intellectual faculties preserved their integrity, and his affections centred in the right place. It may be said that the last eight years of his life had been passed in one of two extremes—the most abject despondency, or the most delightful exhilaration. During this latter state, under a misguided philanthropy which excited in his mind the wildest schemes for doing good, without counting the cost or calculating the probable success of the means employed, he performed some of the strangest acts of benevolence that can be conceived. The relation of a single instance will suffice. As was his wont during the reign of the exuberance of animal spirits, he was gaily walking or rather dancing through the streets at midnight, singing the fragment of some old sentimental song, when he encountered a solitary female to whom he addressed his ditty, and with whom he soon made himself acquainted. Bent on doing good, he drew from her the story of her seduction, and determined to reclaim her. He conducted her home, volunteered to pay her board provided she would entirely discontinue the practice of her craft, obliged her to reveal the state of her health, employed a physician to cure her of syphilis, wrote to her mother in the country that the work of reformation was begun, and that she would soon have her lost child restored—and took upon himself the office of father confessor and spiritual adviser. Now A. B., though when under the influence of mental excitement profaned a little, drank a good deal, and committed many extravagances, was always more or less guided by religious impressions, and was at heart really a pious man. To be sure, he had his own peculiar way of showing this: thus he was regular at his private devotions; but instead of repeating, he sang his prayers, and accompanied them by salutations and various other inappropriate movements. In talking he had a way of saying, “a d—d fine fellow,” or “a d—d good joke.” When reproved and told that this language was inconsistent with the character he had assumed, he defended himself by saying that he was a man of ardent temperament, and that the objectionable expression coming from him was no more than *very* from the mouth of a man of ordinary temperament.

The physician whom he employed to attend the poor girl, related some highly interesting scenes that passed between the patient and A.

B. Imagine "a madman gay," under the delusion of being entitled to a throne, in the full vigor of manhood, and apparently with all his passions strongly developed, and committing all sorts of extravagances, about to set himself to work, with feelings entirely platonic, to reform a girl of the town. Imagine him gaily dressed, dancing into a house, assembling the frail sisterhood, lecturing them on their vices, making them all bend their knees while he prayed most devoutly, and then rising, take his leave after kissing, or in his own language, giving his protégée "a chaste salute." Imagine all this, and we have but an imperfect idea of the whimsical benevolence of this unfortunate gentleman, and of what actually occurred on the occasion alluded to.

About a fortnight previously to being sent to the Asylum, he arrived in the city evidently in a state of mental excitement. The election, meeting with old friends, drinking, which he indulged in only when insane, increased that excitement. He went to Baltimore on business, and there launched into the sea of politics, deciding, as he supposed, the fate of the election. Upon returning to New York, he committed no many overt acts of insanity that it was deemed necessary to place him under immediate restraint. And now begins that part of his case which is most interesting—which involves the question of his sanity. He had been formerly for a few months a lunatic at law, and justly suspected his friends would again institute proceedings against him.

Madman as he was, he displayed a degree of diplomatic tact that would do no discredit to the school of Metternich. On discovering the intentions of his friends, instead of making an open show of resistance, he formally proposed a compromise. As he had lost confidence in his natural friends, all direct intercourse must cease; but as business matters required some sort of intercourse, he said if they would allow him to choose a third person to go between them, and to visit him two or three times a week, he would submit. His friends consented, and he chose his visitor, not for the ostensible object as a medium of intercourse, but that he might have an interested individual to testify to his sanity in opposition to the officers of an institution, naturally inclined in its favor, whenever his case should come on for trial. He selected a physician of high standing, and possessed of more than ordinary knowledge of medical jurisprudence, with the understanding that he was to be regularly paid for each visit.

Though when first admitted he was in a high state of mental excitement, as soon as the officers left him in custody of the Asylum he became calm, and broached to me, with his usual finesse, the matter of having engaged another physician. He expressed the utmost confidence in my skill, immediately sought my professional advice, said he would follow all my prescriptions, and added that he had employed Dr. C. D. as a sort of spy on his treacherous friends. Venesection, and the absence of late exciting causes, were soon followed by a tranquil state of mind; and on the 19th he talked quite rationally. The liberty of the grounds was now granted him on certain conditions; but he over-stepped the limits so repeatedly, that it was necessary to confine him to the house again on the 1st of December. This act of justice enraged him, and so

much the more, that his insanity had increased. On the previous evening he spoke of having "attained the 30th degree in masonry (but one remove from divinity)"; but immediately fearing he had committed himself, turned round and said to me, "this is not official, and you must not make use of it." He soon got excited, and went on talking about masonry, heraldry and religion. On Sunday he was allowed to go to the village to church, where he left his prayer-book as a pretext for returning and getting more stimulus; which he was prone to indulge in only when under mental excitement.

Talked to-day of "complaining to Old Hickory against all the lunatic asylums in the country."

Dec. 3d. R. *Infus. sen. comp.*, to be followed occasionally by Seidlitz powders and warm baths. Diet light. It may be mentioned that his medical treatment was inactive and irregular; because, under the belief that he was sane, he could be persuaded to use only certain kinds of remedies, and those but occasionally.

6th. Exceedingly anxious to visit the city; mind yet much disordered. In a conversation with me to-day, said that if we lived twenty years we should see Napoleon on the earth again; that there will be a resurrection of him as well as of Alexander, Washington, and all good and great men, but not of such rascals as Cæsar, Ben Franklin, Tom Jefferson, &c.

Now being prevented from going to town, he became excessively enraged, and vented his anger at me in various ways; but finding it answered no purpose, he retracted all he had said. After a period of seclusion, his mind becoming more composed, and his anxiety to return home continuing, it was proposed that he should remain here a week longer, with the privilege of going out when he pleased, but with the promise that he was always to be at the asylum at meal-time. At the expiration of this period, if he continued as well as he was at the commencement, he was to go home.

23d. This being the day fixed for A. B.'s departure, it was deemed advisable that he should go.

30th. Brought back by an officer in a wretched plight, his clothes torn and dirty; he went immediately to bed, where I found him singing, under great mental excitement, but happy. Said he, with great self-complacency, "do you know whom you have been treating so long? I am St. George, Sir, and have received many communications from on high since I left here. In a few days I expect a deputation from the Free Masons of the whole country, or even of the world, to request me to place myself at their head. I have received the blessing of the Catholic Bishop, and have sent on to Rome certain credentials for an important event that is approaching." Among other things, he revealed to me, with great gravity, that "the devil is white."

Considerable physical excitement.

Treatment.—Seclusion, low diet, warm baths and laxatives.

January 1st.—Still great mental disorder. Seems to live entirely on the productions of his imagination; has prints which he fancies emblematical of extraordinary things; has his trunk filled with artificial birds

and holiday gifts for children. During his week's absence from the Asylum, he passed through as many adventures as would happen to an ordinary man in the whole course of his life. He went to Philadelphia, introduced himself to Mr. and Miss Kemble, in the dress of an Englishman of the old school; his head powdered and his legs habited in shorts. He made Miss K. an offering of a complimentary poem, the production of his own pen. He proposed himself to the manager of the theatre as a debutant, gave various recitations and songs; frequented the public places, perambulated the streets at night, hunting out all the strange corners that would yield him merriment; got into difficulties with watchmen; but finding himself growing mad, determined to cut short his career, and to place himself in the Insane department of the Philadelphia Hospital. He accordingly presented himself at the porter's lodge, early in the morning, and demanded admission. This being refused, he knocked the porter down, and proceeded towards the quarters for the insane. But the porter rallied, and by the aid of an assistant expelled the intrusive patient, who soon found out the lodging of one of the visiting physicians, and procured admission in the legitimate way.

4th. Still under considerable excitement, and various delusions. On Sunday, his sense of religious obligation will not allow him to pass the day without its due observance. If confined to the house, he gets such patients together as he can persuade to become listeners, and goes through the services of the church with great fervor; but wo to the man who disturbs the solemnity of the occasion; neither time nor circumstance saves him from his anathemas.

8th. Mind considerably sobered; says he begins to think he has been extravagant, but if listened to, soon runs into his usual vagaries about masonry, &c. His only treatment at present, warm baths.

15th. Continued to convalesce, or rather it may be said to keep his mind under control, until yesterday, when he went to the city to defend himself against a writ "de lunatico inquirendo." Before the hour for trial he went around town, called on a Jewish Rabbi recently arrived from Jerusalem, got excited, indulged in strong drink, and his case not coming on, returned to the Asylum quite frantic.

16th. Excitement in a great degree subsided; attempted to explain his conduct of the 14th inst., and quotes Hippocrates to prove the propriety of getting drunk once in a while.

22d. He remained quiet till yesterday, when he again went to town to defend himself, and now it will be recollected that though he had exercised a wonderful degree of control over his feelings and the action of his mind, no radical change had taken place in his disease, and that he still entertained the most absurd delusions. He bore the excitement of the city much better than he did last week. The trial came on, the evidence was all positive and uncontradictory; even the testimony of the physician employed by himself went directly against him, and so confident was the counsel employed by his friends, that the case was submitted to the jury without a remark.

At this stage of the proceedings, A. B. requested that he might be left alone with the jury, to make some explanations which he deemed

necessary. The request was readily granted, on condition that I also should remain.

His personal liberty and the voluntary use of his property were at stake, and his mind seemed to rise with the occasion. Naturally eloquent and ready, he got up and addressed the jury with great effect. He began by acknowledging that he had unfortunately been the subject of mental infirmity, from which, by proper care, he had recovered, as must be obvious to all present; he avoided dwelling on the peculiarities of his derangement, for he well knew that in an unguarded instant he might commit himself; he alluded to the good sense and justice of the jury; spoke directly of the learning and high character of the Commissioners constituting the Court before whom he was standing, and aimed a delicate compliment at the medical member of the commission, for his professional skill and metaphysical acumen. He then gave a concise, clear, and correct statement of his pecuniary affairs, which corresponded precisely with that already placed before the jury, and submitted his case to them with entire reliance on their judgment and sense of justice. He returned to the Asylum with me that night in high spirits, well pleased with his address, and the obvious impression he had made on the court and jury, and quite sanguine that he would be released. In speaking of the compliment addressed to the medical member of the commission (who belonged to the Society of Friends), he said: "I feared that man more than either of the rest, he looked so thoughtful and sagacious," and added, "didn't I tickle the Quaker?" Excepting A. B., we were all surprised next day to learn, that the jury had decided he was a sane man.

February 4th. Is yet at the Asylum, continues tranquil, and conducts himself with much propriety.

6th. Discharged this day by an arrangement between his own and the opposing counsel.

8th. Brought back by officers, not in an excited but in a depressed state; owning his madness and regretting the follies committed under its influence, with extreme bitterness of spirit. It seems that as soon as he got into the city he lost all self-control, and actually ran wild.

9th. At the instance of his own counsel, was taken this day before a sheriff's jury by an order from the Chancellor. He made no defence, was found a lunatic, and submitted with good grace.

13th. Mind in a very tranquil state; says he has never been so rational since he has been here as he is at present, and there is a good reason for this. As long as he hoped to defeat his friends and retain the control of his property, his mind was in a constant state of anxiety and ferment; but as soon as this prospect was removed, his wandering thoughts were called home, and he began to reflect seriously about himself. This strong moral influence, aided by seclusion, light diet, warm baths, and laxatives, soon restored him to a comparatively rational state of mind.

20th. Continues to improve; goes to the city to spend a few days.

24th. Returns to the Asylum in a composed and pretty correct state of mind.

26th. Discharged much improved.

Though very much improved, he was not considered quite sane, because, from being unduly excited, he had sunk into the opposite extreme. It is true he judged correctly of the relation of things, and was, perhaps, entirely capable of transacting business, but the depressed state of his feelings gave a sombre hue to everything brought before him. In this state he returned home, and continued in that frame of mind which for several months usually succeeds a paroxysm of excitement. His despondency now increased, and in an unexpected moment he destroyed himself.

Both these cases show,

1st, That where there is a strong motive for exertion, what an extraordinary degree of self-control the insane, even when under the most powerful delusions, can exert over themselves.

2d. That in judging of the sanity or insanity of an individual, we should not take a single, isolated view of him as he may happen to be at the moment of inquiry, but the whole of his case in connection.

3d. That a physician who is to be called to testify in a case of insanity, should not only provide himself with an opinion, but also with the facts upon which that opinion is founded.

These cases, viewed as a whole by persons at all accustomed to the operations of the mind in a state of disease, would not for a moment admit of doubt. They are marked by what jurists consider conclusive, and what they have hitherto deemed indispensable to constitute lunacy—distinct delusions. But there is a form of mental derangement long recognized by writers on medical jurisprudence in France and Germany, and more recently by some of the English authors, and variously denominated mania without delirium, impulsive insanity, and moral insanity, in which, without the existence of hallucination, mental disorder manifests itself by the conduct rather than by the conversation. It is under the influence of this malady that persons hitherto of unexceptionable character, wantonly destroy property, fire houses and commit murder.—*N. Y. Jour. of Med. and Surg.*

OPERATION FOR STRABISMUS.

[Communicated for the Boston Medical and Surgical Journal.]

O. S. B., 23 years of age, has had the right eye turned inward from birth. The obliquity is so great that a portion of the cornea is concealed at the inner canthus. His occupation is the making of scythes, and while working both eyes are never used at the same time. When the left eye becomes fatigued, the patient has the peculiar power, and has acquired the habit of changing them, so that the right eye becomes useful and the left is relieved.

Operation.—The conjunctiva being raised by a pair of small forceps, a semicircular incision was made about four and a half lines from the cornea. After separating the muscle from the cellular substance in which it was enveloped, it was raised upon a blunt hook and divided with scissor. The effect of the division of the muscle was instantaneous, the

eye becoming at once perfectly straight. Patient says that it felt as if it flew into its place. Vision is already very much improved, and B. is perfectly conscious that he uses both eyes in looking at objects. The power which he formerly possessed of using the eyes alternately is entirely lost.

SAMUEL SALISBURY, JR.

Avon, N. Y., Jan., 1841.

BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, JANUARY 27, 1841.

DR. HUSTON'S LECTURE.

THE gentleman who delivered this discourse is in the chair of Obstetrics and the Diseases of Women and Children at the Jefferson Medical College, Philadelphia. At the opening of the term, in November last, he gave an introductory, as the custom is in the American schools of medicine, which had the good fortune to be received with eclat by the class, and to that circumstance we are indebted for an acceptable pamphlet. The historical observations upon the antiquity of the obstetric art, together with a comment upon the writings of Hippocrates, Celsus, Rufus, &c., must have been particularly interesting to the audience for whom they were designed. One of the good things manifested in Dr. Huston's Lecture must not go unnoticed, because it is so rare a virtue in these times, viz., a willingness to let his hearers know what his own opinions are. Professional men are prodigiously afraid of each other, of late, and if there is anything of which they stand in absolute fear, it is of committing themselves by expressing an individual opinion, unshackled with provisos. He lashes the author of "Observations on the Impropriety of Men being employed in the business of Midwifery," supposed to be Sir A. Carlisle, most adroitly.

"The recent attempt of an individual to cast odium upon this custom, by animadverting on what he is pleased to term '*the scandalous practice of employing men in the business of midwifery*,' has had no other effect than to secure for him the contempt of all who deem him worthy of so much notice. Substituting idle gossip for facts, and unworthy prejudices for arguments, his contemptible production has met, at the threshold of public opinion, with the merited fate of all anonymous libellers. That the hardy old-fashioned Queen of George III. should have been delivered safely of all her children, without the aid of a male practitioner, and that therefore all the women in Christendom ought to bear children in the same way, may be a very sapient argument with that writer, but it must sound very like nonsense to every one else. In that respect, at least, her majesty's grand-daughter followed not her example; nor is her other grand-daughter, the present queen of Great Britain, likely to be influenced by such arguments, since the Court Journals have already announced that three distinguished practitioners are engaged to attend her approaching confinement. Even in Paris, where females are educated for the business, and which boasts of a Lachapelle and a Boivin, the sagacious mind of Napoleon could discover abler hands and safer councils among

our sex, to which to trust the partner of his throne and the heir of his glory. The mind of that man must be disordered indeed, which can imagine that a lewd thought might be excited during the pains and perils of child-birth!"

From the 18th page to the close of the 19th, there is evidence of the extensive research of the author. The following remarks on the sympathetic derangements incident to pregnancy, savor not only of a charitable disposition, but a profound knowledge of the department in which Dr. Huston is an able teacher.

"The extensive sympathetic derangements incident to pregnancy are sometimes exceedingly severe, and very seriously affect the health and comfort of the female, and that independently of any appreciable change of structure in the suffering organs. These cases, in various degrees of severity, being of daily occurrence, are frequent objects of the physician's care, and therefore constitute proper subjects for our consideration. One class of these, of which the uterus is the undoubted seat, is especially entitled to our most serious attention—I mean the mental influences dependent on the irritations of that organ from gestation. The severer cases, in which reason is entirely subverted, alarm at once the friends of the sufferer, and therefore receive the prompt assistance of our art; but it is the slighter, rather than the graver forms of these affections, that claim our sympathy and regard.

"That man is but partially instructed in the business of his profession, who looks upon the practice of medicine as an art by which certain physical agents are brought to act upon the purely physical aberrations of the human frame, and is neglectful of those physico-moral influences that modify, and occasionally disorder the functions of every vital organ, and the not less remarkable reaction of organic disease upon the mental energy and moral responsibility of the individual.

"Of the many causes of uneasiness and family disquiet which tend to embitter the current of domestic life, the most difficult of comprehension to common observers, as well as of correction, are those irregularities of temper and behavior that result from the derangements of the uterine function.

"To yield to all the follies of a morbid appetite—all the requisitions of an habitual self-indulgence—would be a silly and very culpable weakness on the part of those on whom devolves the duty of administering advice and exercising control; but unquestionably much unhappiness in domestic life occasionally originates from the incapacity of those immediately interested to appreciate rightly the physico-moral failings of the suffering female. The irritability of temper, the unreasonable demands, the vitiated appetite, and various troublesome affections very commonly observed during gestation, and occasionally during temporary derangements of the menstrual function, are but rarely viewed by the young and inexperienced as the evidences of disease. Too frequently, on the contrary, they are looked upon as mere indulgences of self-will, and a vicious disposition. The present, however, is not the time for enlarging further upon this interesting subject."

Medical Witnesses.—It so happens that the law periodicals, in this city, have lately held the medical profession up to the world as bad specimens of what witnesses should be before a court of justice. Technically, they are

said to break down on the stand, so that lawyers can always make themselves merry at the expense of a pretty respectable physician, in order to operate, one way or the other, on the jury. The last No. of the Jurist has several pages devoted to this subject, which seem to have been called into being by the testimony given in at the late trial of Mrs. Kinney, though the author does not say so. We do not pretend to deny that medical practitioners may not appear as well before a judicial tribunal as those who have had their manners polished by constant intercourse with gentlemen of the bar—but we do contend that they are as honest in their intentions, and as scrupulous in testifying to what they believe to be fact, as any other class of men. That physicians too frequently commit themselves in giving an uncalled-for opinion, is not to be denied. This is the rock on which they most frequently strike, and they thus destroy the weight which would otherwise have been given to their testimony. If forty physicians were summoned before the Judges of the Supreme Court of Massachusetts, and were asked for a medical opinion upon a point about which it would seem there could possibly be but little if any difference in the answer to be given, one of the legal profession says he has no doubt there would be just *forty opinions*, differing from each other. Hence it is said that courts are never enlightened on dark questions by physicians. Again—the profession is accused by the lawyers of being excessively prosy. When they get up before their honors, they have too much to say—and not unfrequently appear disposed to impress the court favorably with the profundity of their individual attainments in science. Now if these criticisms are just, it is certainly an easy thing to profit by the suggestions thrown out from various directions, and thus obviate the complaints which are urged against medical witnesses.

A New Medical College.—A petition is before the Legislature of Massachusetts for the incorporation of a medical college in the city of Lowell. Dr. Bartlett, formerly mayor of that city, who has many years been connected with a medical institution, is one of the petitioners—and being also a member of the House, there is every reason to believe a charter will be granted. The impression, thus far, is that no difficulty will be in the way. There are already two in the Commonwealth—and should Amherst College ask permission to confer medical degrees, the small number of students will be so subdivided that neither institution can hope to flourish.

Excision of the Maxillary Glands in Horses.—Years ago, the gipsies about Norwood (England) used to buy up glandered horses, have the maxillary glands dissected out, an astringent lotion injected up the nose, and thus cure them. It seems that veterinary surgeons are constantly in the habit of performing operations of the boldest and most formidable character on horses, which are hardly regarded as subjects of interest from their frequency, and from which hospital surgeons might learn important lessons in the management of human diseases.

Restiaux's Fluid Magnesia. MR. EDITOR.—I wish to call the attention of the profession to the article of *fluid magnesia*, manufactured in this city by Thomas Restiaux, chemist, 132 Hanover street. It is prepared of

equal nicety, purity and strength, with the English preparation of Sir J. Murry. There is no quackery in offering this article, or in recommending it to the general use of the profession or community. Magnesia, when used for a long period in a concrete form, is liable to effect important injury to the digestive apparatus, and it is in derangements of these organs that it is mostly employed. The fluid preparation obviates all objections that justly lie against the solid form of it—and particularly on account of the nausea which magnesia occasions to almost every one when taken into the mouth in powder, or when suspended in the commonly used fluids of milk, water, &c. Physicians will find in this article the very thing they so generally wish for, an antacid, in the frequent disorders of the stomach to which pregnant women are liable, and the infantile diseases of our summer months. If found equally well made and of equal strength with the English article, the American should be encouraged by the profession.

Boston, Jan. 18, 1841.

A PHYSICIAN.

Medical Miscellany.—Dr. Thomas Harris, who has long, faithfully and gratuitously, says the Medical Intelligencer, afforded his valuable services to the Pennsylvania Hospital, has resigned, and Dr. Edward Peace is appointed in his place.—The antidote to the poison of prussic acid is thought, from some recent experiments, to be cold water. The incident of the sudden restoration of a dog strengthens the opinion. A gentleman in Herefordshire gave his dog 20 drops—but as the animal did not die as quickly as was expected, but rather lingered in torment, he threw him into the pond, to complete the work of death by drowning. In an instant the dog was completely restored.—Lord Francis Egerton has purchased the original drawings of the celebrated Agasiz, in his great work—*Poisons Fossiles*, for £5000, and allows the author to retain them at Neufchatel as long as he requires the use of them.—Andrew Whittier, of Cambridge, Ohio, recently died at the advanced age of 125 years, wanting one month.—We are informed by a letter from the parish of St. Elizabeth, in Lower Canada, that Alexis St. Martin, on whom Dr. Beaumont performed his interesting experiments, is now a resident of that parish. Assistance is kindly promised us in obtaining further information respecting him, and we shall be glad to aid any society or individual who may be desirous of engaging him for further experiments.

TO CORRESPONDENTS.—The communications of Drs. Ellsworth, Atkinson and Bemis, will appear next week.

MARRIED.—In St. Andrews, M. R. Fletcher, M.D., of Boston, to Miss Ann Catherine Allanshaw.

Number of deaths in Boston for the week ending Jan. 23, 18.—Males, 10.—Females, 8. Stillborn, 1. Of consumption, 1.—old age, 1.—infantile, 2.—hooping cough, 1.—smallpox, 2.—disease of the spine, 1.—apoplexy, 1.—typhoid fever, 1.—convulsions, 1.—sudden, 1.—canker, 1.—cancer, 1.—lung fever, 1.—dropy on the brain, 1.—brain fever, 1.

MASSACHUSETTS MEDICAL SOCIETY.

A STATED MEETING of the Counsellors of the Society will be held on Wednesday, February 2d, at 11 o'clock, A. M., at their room, Athenaeum building, Pearl Street.
J 27—tm

GEO. W. OTIS, Jr., Rec. Sec'y.

REMOVAL.

C. A. ZEITS, Surgical Instrument Maker, has removed from 350 Washington street to Bromfield place, near Bromfield street.
J 27—

W. C. Morrison

TREMONT-STREET MEDICAL SCHOOL.

THE annual instructions of the Tremont-street Medical School, for private pupils, will commence on the first day of September, consisting of lectures and examinations in the different branches of professional study—as follows:

A course of Lectures and Examinations on Anatomy, in September and October, by Dr. Reynolds, preparatory to the Winter Lectures at the Medical College.

A course of Lectures on the Principles and Practice of Surgery, including diseases of the Eye and Ear, by Dr. Reynolds. This course consists of one hundred lectures, and is continued nine months of the year during the whole period of pupillage. Stated examinations are made in the above branches—and private examinations, if desired, of the graduating class.

Lectures and Examinations in Physiology and Pathology, with a distinct course upon Auscultation, by Dr. Holmes, who will also deliver, if time permits, a course of Lectures on Surgical Anatomy during the winter.

A course of Lectures on Midwifery and the Diseases of Women, and weekly examinations on the same branches and on Chemistry, by Dr. Storer. The above course is illustrated by practical manipulations with the manikin. Arrangements have been made to provide the pupils with obstetric cases as often as may be necessary to familiarise them with this branch of practice.

The departments of Theory and Practice of Medicine, and Materia Medica, are under the superintendence of Dr. Bigelow—who will visit the Hospital with the pupils, for practical observation of disease, and clinical instruction. The exploration of the chest in diseases of the thoracic organs, is made the subject of particular attention in these visits.

Practical Anatomy has always been a primary object in this school, and ample provision is made for a permanent supply of subjects from November to April. The teachers will avail themselves of occasional opportunities to show the pupils interesting cases in private practice—and operations in Surgery and Ophthalmic Disease. The pupils may attend daily on the practice of the physicians or surgeons of the Massachusetts General Hospital, and the Eye and Ear Infirmary.

Convenient rooms, light and fuel, are provided by the instructors.

JACOB BIGELOW,
EDWARD REYNOLDS,
D. HUMPHREYS SPORER,
OLIVER W. HOLMES.

Boston, June 24, 1866.

epimeop6m

MEDICAL SCHOOL OF MAINE.

THE Medical Lectures at Bowdoin College will commence on Monday, the 15th day of February, 1867, and continue three months.

Anatomy and Surgery, by

Theory and Practice of Physic, by

Obstetrics, by

Chemistry and Materia Medica, by

The Library contains 300 volumes, and is annually increasing.

Amount of fees for the Lectures is \$50, payable in advance.

Degrees are conferred at the close of the Lecture Term in May, and at the following Commencement of the College in September.

Brunswick, October, 1866.

D. 2.—61

JOSEPH ROBY, M.D.
JOHN DELANATER, M.D.
EZEKIEL WELLS, M.D.
PARKER CLEVELAND, M.D.

P. CLEVELAND, Secretary.

FLETCHER'S TRUSS.

THE following recommendation of this truss has lately been received by the proprietor.

The subscriber having made frequent trials of the truss invented by Dr. Fletcher, has no hesitation in saying that he regards it as superior to most instruments of the kind now in use, with which he is acquainted. Its advantages consist in the size and form of the pad, the ease with which it is moved, and the readiness with which the pressure is increased or diminished. It is moreover in his opinion as well calculated as any other to produce radical cure of Hernia.

Boston, Jan. 7th, 1861.

Jan. 13.—

GEO. HAYWARD.

The subscriber gives notice that being acquainted with the anatomy of hernia, he will attend (agreeably to an arrangement with the proprietor) to the applying of the above highly-recommended truss in the variety of rupture for which it is designed. Persons requiring such assistance can be relied and receive suitable attention free of extra expense.

A liberal discount will be made to wholesale purchasers.

EDWARD FRANCIS,

No. 16 Howard st. near Court st., Boston.

ABDOMINAL SUPPORTERS.

DR. HAYNES' instrument, which is recommended by the profession generally, may now be had at the Medical Journal office. Price, with perineal strap, only \$4—without, \$3.50. By addressing the publisher, No. 104 Washington street, physicians may be readily accommodated.

The Supporters may also be obtained of the following agents:—In New Hampshire, Drs. J. A. Dana, N. Hampton; A. Harris, Colebrook; M. Parker, Acworth; J. Crosby, Meredith; D. Crosby, Hanover; L. S. Bartlett, Kingston; L. Bartlett, Haverhill; F. F. Fitch, Amherst; Mr. J. M. Wheeler, Dover; N. Kendall & Co., Nashua. In Vermont, Dr. L. Jewett, St. Johnsbury.

SURGICAL INSTRUMENTS.

OF every variety, both English and American, for sale low, by

N. H. — ep6m

BREWSTER, STEVENS & CUSHING, Nos. 50 and 52 Washington st.

THE BOSTON MEDICAL AND SURGICAL JOURNAL is published every Wednesday, by D. CLAFF, JR., at 104 Washington St., corner of Franklin St., to whom all communications must be addressed, post paid. It is also published in Monthly Parts, with a printed cover. There are two volumes each year. J. V. C. SMITH, M.D., Editor. Price \$3.00 a year in advance, \$3.50 after three months, or \$4.00 if not paid within the year. Two copies to the same address, for \$5.00 a year, in advance. Orders from a distance must be accompanied by payment in advance or satisfactory reference. Postage the same as for a newspaper.

W. H. Westland